ENERGY AND COMMERCE COMMITTEE SUBCOMMITTEES
ENERGY

HEALTH
DIGITAL COMMERCE AND

Congress of the United States House of Representatives

Washington, **AC** 20515-3602 January 17, 2019

The Honorable Nancy Pelosi Speaker of the House H-232, U.S. Capitol Washington, DC 20515

Dear Speaker Pelosi,

I am writing today to urge you to consider H.R. 195, the Pay Our Doctors Act, which would fund the Indian Health Service (IHS) in the event of a shutdown through the end of fiscal year 2019.

The federal government is currently in violation of hundreds of treaties, trusts and contracts made with Tribal Nations for failing to provide health care to American Indian and Alaskan Natives (AI/AN). The federal government's obligation to provide health services to all AI/ANs was established by treaties with Tribal Nations and reaffirmed through the United States Constitution, federal law, Supreme Court decisions and presidential executive orders. Violation of the federal government's trust responsibility not only puts the government at risk of legal action, but adds to generational mistrust and trauma caused by the federal government to tribal members.

The Indian Health Service has now been unfunded for over three weeks. When IHS goes unfunded, so to do some of our most vulnerable hospitals and healthcare facilities. Fifty-four percent of the IHS' budget is distributed to tribes through contracts and compacts, and usually in a lump sum payment at the beginning of the fiscal year. Without those funds, tribally-operated hospitals and Urban Indian Health Programs are forced to make ends meet by using any remaining rollover funds from the previous year. If no funds are available, hospitals and clinics are forced to furlough or lay-off staff. Rural hospitals already have difficulty recruiting health care providers, and once they lose staff it can be almost impossible to get them back. This is exacerbated by the promise of continued budget uncertainty year after year.

IHS is the only federal agency that provides healthcare services that is not funded by mandatory or advanced appropriations. Per capita spending on tribal members are thousands of dollars less than individuals who receive health care or health coverage under Medicare, Medicaid and the Veterans Administration. In 2017, the IHS per capita expenditure for patient health services was just \$3,322, compared to \$9,990 per person for health care spending annually.

While Congress and the President remain at an impasse over funding the government and securing our border, I encourage you to bring the Pay Our Doctors Act to the floor to remove Native American health care from the crosshairs of this political fight. This legislation will help

tribes to avoid taking on loans, losing qualified staff, and lessen administrative burdens and prevent costly modification to hundreds of tribal contracts. Since the funding process can take weeks to complete, we must act quickly to fix this situation and get the IHS back up and running.

The federal obligation to Native Americans is clear. The federal government must fulfill its obligation by providing health care to Indian Country. Anything other than a full execution of those responsibilities is unacceptable. Out of respect for the historical relationship the United States has with Tribal Nations we must pass the Pay Our Doctors Act and fund IHS.

Sincerely,

Markwayne Mullin

Member of Congress